



JOINT EVENT

24th International Conference on **PSYCHIATRY & PSYCHOSOMATIC MEDICINE**
&

2nd International Congress on **FORENSIC SCIENCE AND PSYCHOLOGY**

October 12-14, 2017 London, UK

Special Session

Day 1

Psychosomatic Medicine & Forensic Congress 2017

JOINT EVENT

24th International Conference on **PSYCHIATRY & PSYCHOSOMATIC MEDICINE**
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October 12-14, 2017 London, UK



Mark Benecke

International Forensic Research & Consulting, Germany

Two homosexual pedophile sadistic serial killers: Jurgen Bartsch (Germany, 1946 - 1976) and Luis Alfredo Garavito Cubillos (Colombia, 1957)

From a criminalistic and legal perspective, we report two cases of homosexual pedophile serial killers who share certain characteristics. Our sources are first-hand accounts only, i.e., a. meetings with Luis Alfredo Garavito Cubillos / the investigators in Colombia, and b. the yet unreleased original files of the trials against Jürgen Bartsch, as well as letters written by him. Between 1992 and 1999, Luis Alfredo Garavito killed more than 300 children in the core age span between 8 and 13 years (as an exception: 6 to 16 years). His modus operandi remained stable. The children were tied up, tortured, raped, and killed by at least one cut in the lateral part of the neck, or by decapitation. During the killings, Garavito was drunk. During his confessions, he directed the investigators correctly to the scenes of crime spread over large areas of Columbia. Garavito may be released out of prison within the next 15 years, i.e. even before the maximum sentence of 40 years. In 1966, then 19-year old Jürgen Bartsch (1946-1976) was arrested after an unsuccessful attempt to torture, kill and dismember a young boy. Before, in the years between 1962 and 1966, Bartsch had killed 4 young boys aged 8 to 12. He estimated to have undertaken more than 100 further homicidal attempts. The method of murder was beating and strangulation. He dismembered most of the bodies, pricked out the eyes, decapitated the bodies, and removed the genitals. He also tried but failed to perform anal intercourse with the victims. His goal was to skin the life victims. Bartsch openly discussed his wish for dominance, control, and sexual gratification but also his strategies of avoiding prosecution. Under the influence of psychiatric consultations, Bartsch's views on his parents, as much as memories of sexual abuse performed by a teacher, became a topic. In a psychiatric hospital, Bartsch managed to marry a heterosexual woman. During a voluntary castration operation, he died due to an error in the anaesthetic procedure.

Biography

Mark Benecke is head of International Forensic Research & Consulting. He works internationally as a forensic expert on complex cases (blood, DNA, insects). In Germany, he is a Certified and Sworn In Expert for Biological Stains.

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Scientific Tracks & Abstracts

Day 1

Psychosomatic Medicine & Forensic Congress 2017

Sessions:

Day 1 October 12, 2017

Neuropsychiatry | Mood Disorders | Psycho-Oncology | Forensic Science | Forensic Psychiatry | Forensic Psychology

Session Chair
David Truswell
PLIAS Resettlement, UK

Session Co-chair
Toshiko Sawaguchi
National Institute of Public Health, Japan

Session Introduction

Title: Depression and impulsivity mediating the relationship between social anxiety and internet addiction

Catherine So-Kum Tang, National University of Singapore, Singapore

Title: Neurology of violence in schizophrenia and antisocial personality disorder : The role of childhood abuse

Veena Kumari, Sovereign Health Group, USA

Title: Accession to persona and mind without pharmaceuticals-approach under the load of trauma

Toshiko Sawaguchi, National Institute of Public Health, Japan

Title: Hospital admission for severe paediatric dissociative disorder

Matthew Rinaldi, King's College London, UK

Title: Catatonia: A "Frozen Condition?": Case reports, literature review, and suggested treatment algorithm

Cris Coconcea, Christiana Care Health System, USA

Title: Abnormal social interactive behavior in major depressive disorder

Yuan Zhou, Chinese Academy of Sciences, China

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Depression and impulsivity mediating the relationship between social anxiety and internet addiction

Catherine So-Kum Tang

National University of Singapore, Singapore

Background & Aim: Internet addiction refers to excessive or uncontrollable preoccupations, urges, or behaviors regarding computer use or internet access that lead to distress or impairment of daily functioning. Social anxiety refers to the experience of persistent fear and distress of interpersonal situations that often leads to the anticipation of embarrassment or humiliation. A recent meta-analysis has shown a robust significant relationship between social anxiety and internet addiction. Based on the self-regulatory model of social anxiety, we hypothesized that depression and impulsivity would be potential risk factors. These two risk factors would mediate the influence of social anxiety on internet addiction. This study aimed to test this hypothesized multiple mediation model of internet addiction.

Methodology: 1110 participants (420 males and 690 females) aged from 17 to 18 years old were recruited from various Universities in Singapore. All participants were asked to complete a paper-and-pencil questionnaire on standardized psychological scales that assessed social anxiety, depression, impulsivity, and internet addiction.

Findings: About 9.5% of the participants met the cut-off score for a diagnosis of internet addiction. Depression and impulsivity partially mediated the influence of social anxiety on internet addiction. Depression was also found to be a stronger mediator than impulsivity. Higher social anxiety levels were related to higher levels of depression and impulsivity, which were in turn related to higher levels of problematic internet use. The pathways to internet addiction were similar for males and females.

Conclusion & Significance: Internet addiction is widespread and associated with high rates of depression and social anxiety in young adults in the Asia-Pacific region. Prevention and intervening strategies should be designed to address this phenomenon. Assessment and treatment of mood disturbances should also be included in the management of internet addiction.

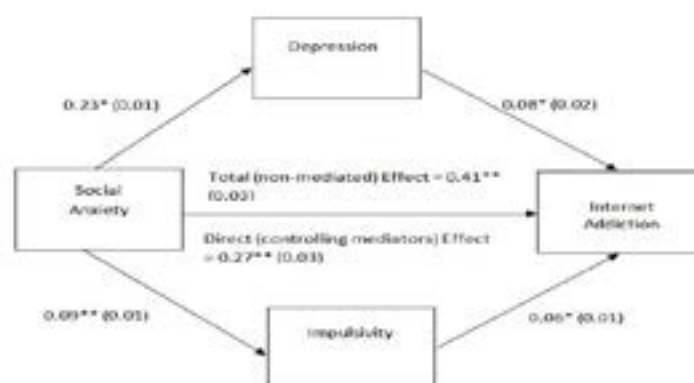


Figure 1. A Multiple Mediation Model of Social Anxiety and Internet Addiction
Note: Values presented are coefficients and standard errors * $p < 0.01$

Biography

Catherine So-Kum Tang is a Professor in the Department of Psychology and the Deputy Director of the Center for Family and Population Research at the National University of Singapore. She obtained her PhD in Clinical Psychology at the University of North Texas USA and LLB at the University of London UK. She is a member of the Editorial Board for *Sex Roles: A Journal of Research*; *Applied Psychology: Health and Well-Being*; *International Perspective in Psychology: Research, Practice, and Consultation*; *International Journal of Stress Management*; and *Asia-Pacific Journal of Counseling*. She has over 300 peer-reviewed academic publications, books, book chapters, and academic conference presentations on addictive behavior, violence against women, trauma psychology, and health psychology.

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Neurobiology of violence in schizophrenia and antisocial personality disorder: The role of childhood abuse**Veena Kumari**

Sovereign Health Group, USA

Mental health problems have a direct relationship with violent offending in that people with a diagnosis of antisocial personality disorder (ASPD) and a proportion of those with a diagnosis of schizophrenia are at most risk of committing violent crimes. Individuals who as children experienced psychosocial adversity, in particular sexual or physical abuse, are known to have a heightened risk of developing mental disorders, and although the majority of these do not commit any violent offences as an adult, they are on average more likely to engage in violent crimes than those who did not experience abuse. A number of studies indicate a range of common and distinct neuropsychological deficits in groups of offenders with schizophrenia-alone, APD-alone or with comorbid schizophrenia and ASPD. Violent mentally-disordered individuals with ASPD or schizophrenia also display an array of structural and functional deficits in brain regions that are widely implicated in regulation of violence through their involvement in decision-making, empathy, impulse control and emotion regulation. Some of these abnormalities in violent mentally-disordered offenders appear to be explained by their histories of stressful childhood experiences. Current and future therapies aiming to reduce violence in such populations would benefit by attending to biological and behavioural correlates of childhood abuse.

Biography

Veena Kumari obtained her Doctorate in Psychology from Banaras Hindu University in India before moving to the Institute of Psychiatry in London, UK, where she most recently served as the Professor of Experimental Psychology. Currently, she is the Chief Scientific Officer for the Sovereign Health Group, USA. Her research interests include the neurobiology of violence in psychosis and personality disorder, pharmacological and psychological therapies in psychosis, addiction, and personality and individual differences. She has received various national and international awards for her research; most recently, the prestigious Humboldt Research Award in 2014. She has published over 250 peer-reviewed articles and served as the Associate Editor or Editorial Board Member for a number of journals including *Personality and Individual Differences*, *Psychiatry Research: Neuroimaging*, *Current Psychopharmacology*, *Schizophrenia Research and Treatment*, and *the Australian and New Zealand Journal of Psychiatry*.

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Accession to Person and Mind without or with less pharmaceuticals approach under the load of trauma**Toshiko Sawaguchi**

NIPH & Showa Univ. School of Medicine, Japan

It is important how to access person and mind for medical and health care particularly under the load of trauma. Here three approaches were introduced in rather recent Japan. 1) Ego state therapy: Psychotherapy for multiple personality disorders. The ego state therapy was a treatment procedure for multiple personality disorders. The theoretical background and practical points of these methods were developed. As the beginning, the ego state therapy was developed as a hypnotherapy but it was evolved as a safety therapeutic method on combined with trauma processing therapies. As the clinical meaning of this treatment, it is seemed to be needed to provide a lid opening of mind and persona. (Prof. Toshio Sugiyama) 2) To access medical specialists by health specialists in the regional health field, the possibility of voice approach has been tried to perform for Dissociative Identification Disorder (DID) patients as one of health assessment for medical access. The first step is if the plural personae in one DID patient could be discriminated plural personae. The different voice from different personae in one DID patient could be distinguished using basic frequency curve. In DID patients, the short transition time among plural personae could guide to the risky situation such as suicide. This discrimination of voice approach by each persona could be contributable as an Access Assessment for medical access. 3) Possibility of Open Dialogue Approach to Perpetrators of Abuse and the Psychological Troubles in Multidisciplinary Cooperation Open Dialogue Approach is sometimes effective to have objective prospect for oneself via the seeing of one object as more than one (polyopia) for perpetrators of abuse and these objective prospect could lead to going get better relationship. This might be the same in troubles in multidisciplinary cooperation. (Prof. Toshiko Sawaguchi).

Biography

Toshiko Sawaguchi, M.D., Ph.D., L.B.A Research Managing Director, National Institute of Public Health, Ministry of Health Labour & Welfare, Saitama, Japan since April 2017 (Life Health Promotion, Maternal & Child Health) Visiting Professor, Showa University School of Medicine, Tokyo, Japan Forensic and Paediatric Forensic Pathology and Clinical Forensic Medicine for more than 25 years, child health and paediatrics for 10 years.

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Hospital admission for severe paediatric dissociative disorder**Matthew Rinaldi, Daniel Ilzarbe and Marinos Kyriakopoulos**

King's College London, London, UK

Bethlem Royal Hospital, UK

Statement of the Problem: Dissociative disorders are an under-researched condition in child and adolescent mental health and no specific guidelines exist to inform management.

Methodology & Theoretical Orientation: We audited the outcomes of patients diagnosed with dissociative disorders as part of their difficulties over a 5-year period on a tier-4 national and specialist inpatient unit for children between the ages of 4 and 13. Information was collected for diagnoses, gender, length of admission, medication on admission and on discharge, Children's Global Assessment Scale (CGAS), Health of the Nation Outcomes Scale for Children and Adolescents (HONOSCA), additional investigations, interventions, Mental Health Act (MHA) status and Discharge plans.

Findings: Six female patients were identified and their diagnoses included dissociative motor disorder, dissociative seizures and other dissociative disorders (fainting) and all patients had several co-morbidities. Mean CGAS and HoNOSCA scores improved from admission to discharge for all patients from 36 to 64 and 15 to 5 respectively. The mean length of admission was 172 days (Range: 114 - 232). No patients were detained under the MHA. Treatment programmes were varied between the patients according to need. The most common interventions were Cognitive Behavioral Therapy, additional physical health investigations for those with co-morbid physical health diagnoses, family therapy, occupational therapy and medical review. Novel treatment methods such as mindfulness, play therapy and mirror box therapy were also employed.

Conclusion & Significance: We recommend that patients with dissociative disorders are offered these interventions, tailored to their needs. Future research is required to create guidelines for evidence-based practise and to develop novel treatment methods for this complicated patient group.

Biography

Matthew Rinaldi is a core Trainee Psychiatrist on the Maudsley training programme. He has interests in psychosomatic conditions, the psychotherapeutic understanding and multi-disciplinary management of them. A trainee who works for bottom-up service improvement, his work stems from under-researched problems that he encounters in clinical practice.

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Catatonia - A "Frozen Condition?": Case reports, literature review, and suggested treatment algorithm

Cris Coconcea¹ and N Coconcea²

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²Case Western Reserve University School of Medicine, USA

Background: According to recent statistics, 5–9% of all psychiatric inpatients show some catatonic symptoms. Among which 25–50% are associated with mood disorders, 10–15% are associated with schizophrenia, and the remainder are associated with other mental disorders. Recent developments in the treatment of catatonia are raising the GABA_A vs. GABA_B hypothesis of catatonia.

Methods: This paper describes 7 cases of benzodiazepine-resistant catatonia responding to treatment with zolpidem and critically reviews the current literature on the treatment of catatonia, proposing an algorithm for the diagnosis and treatment of this condition.

Results: All 7 patients in this report are showing similar catatonic symptoms, lack of response (or partial response) to other treatments, and same patterns of response to zolpidem, including an initial zolpidem challenge test. From the review of the literature on catatonia, there is growing evidence suggesting the role of GABA_A agonists in the treatment of catatonia, as well as for the possible pro-catatonic effect of the GABA_B agonists, with important potential clinical applications in the treatment of this severe condition.

Conclusions: Zolpidem, a GABA_A specific agonist appears to be a new and safe therapeutic approach for catatonia, potentially useful in benzodiazepine-resistant patients. More research will be needed to replicate and further understand the mechanism and sites of its activity. Various agents described in the literature as useful for the management of catatonia are critically reviewed in terms of mechanism of activity and strength of evidence, and an evidence-based algorithmic approach to the diagnosis and treatment of catatonia is proposed.

Biography

Cris Coconcea, M.D is director of psychiatry residency training program at Christiana Care Health System in Wilmington, DE, and Clinical Assistant Professor of Psychiatry at CWRU School of Medicine in Cleveland, OH. His clinical, research interests and presentation topics include catatonia, psychotic disorders and acute inpatient psychiatry. He has lectured extensively at local, national and international conferences.

Nicole Coconcea, MD is medical director of integrated care in psychiatry and geriatric psychiatrist at Christiana Care Health System in Wilmington, DE, and Clinical Assistant Professor of Psychiatry at CWRU School of Medicine in Cleveland, OH. Her clinical, research interests and presentation topics include integrated care and medical comorbidities of the geriatric psychiatric patient

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Abnormal social interactive behavior in major depressive disorder

Yuan Zhou

Chinese Academy of Sciences, China

Statement of the Problem: Major depressive disorder (MDD) is characterized with significant and pervasive impairments in social functioning. Limited knowledge about social dysfunction in MDD results from traditional paradigms, which lack insights into social interactions. Game theoretical modeling offers a new tool for investigating social interactive impairments in neuropsychiatric disorders. Several studies have used an Ultimatum Game to study social interactive behavior as a responder in MDD and obtained inconsistent findings. More importantly, it is unclear for the underpinnings of the abnormal behavior in MDD. We hypothesized that sensitivity to context changes is abnormal in MDD patients during the Ultimatum Game.

Methodology & Theoretical Orientation: In order to test our hypothesis, we recruited 27 MDD patients and 28 matched healthy controls to perform a classical Ultimatum Game as responders. During this game, an offer with fairness level from 4%-50% could be proposed either by a human or by a computer.

Findings: We found that MDD patients showed decreased rejection rate for the unfair offers and increased rejection rate for the fair offers. In addition, the patients were unable to discriminatively treat unfair offers from computer and from human proposers, unlike the healthy control whose rejection rate for human proposer was higher than that for computer proposer. Furthermore, using binary logistic regression modeling, we found that MDD patients showed decreased absolute values of both the slope and intercept across human proposer condition and computer proposer condition (respectively, $P=0.004$ and $P<0.001$), suggesting that the influence of fairness context on rejection rates was reduced in MDD patients.

Conclusion & Significance: MDD patients showed insensitivity to fairness context, which explained the pattern of lack of changes towards fairness during the Ultimatum Game. These findings suggest that reward processing and prediction error in a social context may be impaired in MDD patients.

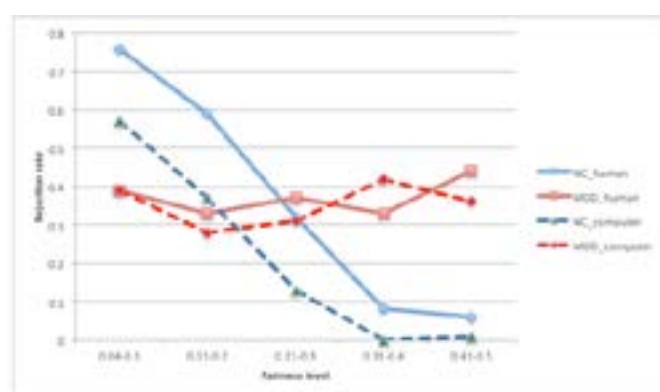


Figure 1. Changed rejection rate for offers in patients with Major depressive disorder (MDD)

Biography

Yuan Zhou received her MS in Psychiatry and Mental Health from Wuhan University in 2004 and her PhD in Pattern Recognition and Intelligence System from Institute of Automation, Chinese Academy of Sciences (CAS). She has been conducting research actively in neuroimaging and mental health, at first in characterizing the brain network of schizophrenic patients using resting-state fMRI and then in investigating cognitive deficit in psychiatric disorders using task-based fMRI. Recently, her research interest has focused specifically on understanding social decision making in patients with schizophrenia or major depressive disorder and its underlying psychopathology and neural basis. She has published her work in international journals including *Cerebral Cortex*, *NeuroImage*, *Schizophrenia Bulletin*, *Schizophrenia Research*, etc.

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Special Session

Day 2

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**Toshiko Sawaguchi***National Institute of Public Health, Japan***Latent forensic pitfall associated with substantial toxicological problem in the maternal & child health in Japan**

AIM: In recent health-medical policy, comprehensive approach has been applied not only health for elderly people but also maternal & child-health. Using the plural keywords such as care, rehabilitation, health care, medical care, prevention, home care, linkage with medical treatment and self-reliance support, spatial regional comprehensive care system has been being structured. Also as for maternal and child health, spatiotemporal comprehensive system since pregnancy till child care period has been being prepared. In this process, latent pitfall associated with substantial toxicological problem in the maternal & child health could be suggested. During foetus and new-born period, without consent of child oneself, maternal and new-born intake of pharmacies and drugs could be happened and the public statistical recognition would be difficult in some cases. Here, the process has been reported to recognize this latent pitfall will report.

METHOD: 1) To recognize the background of administration of pharmacies during perinatal period and pregnancy, real status and index of hazard and toxicity and the policy reaction of those were investigated using Japanese and International references and the administrative direction were investigated. 2) The definite opinion that the socialization of problems are dominant to pick up as administrative subjects. Here, not via media to formalize health policy issues, via academic societies the existence of latent pitfall was discussed through the three symposiums such as the Japanese Society of Public Health, Japanese Society of Clinical Toxicology and Japanese Association of Criminology. The titles of three symposiums are the followings: Administrative reaction to substantial problems in regional comprehensive care, hidden toxicological problems in maternal and child health and Correctional facilities and regional sustained community life support centres.

RESULTS: 1) As for the recognition of hazard and toxicity, Japan has accepted more strict view than other international countries and also has accepted pregnancy contraindicated drug administration. Totally if some risk does have existed some progress could be considered if some goodness will be expected. Stimulant products and stimulant similar products are secreted in maternal milk and seemed to be breastfeeding contraindicated. Administration of stimulants to pregnant mothers who are the neurodevelopmental Disorders such as ADHD, LD and ASD etc. should be considered in near future. As for the index, it should be considerate if the developmental indexes such as Denver's Developmental Scale could be used or not as the index of hazard and toxicity of pregnancy. 2) Contraindicated drug administration. Just teratogenicity could be considered as before. 3) In Japanese regional comprehensive care system, the regional transition support associated with maternal and infant toxicology and the outcome persons from correctional facilities and Regional Sustained Community Life Support Centres. 4) The latent pitfall and ignore of new-born and foetus toxicological situation has come from the non-existence of statistic score of living persons and also dead persons in Japan. 5) On the other sides, the outcomes between European and American Substantial Epidemiology and Japanese Substantial Epidemiology was different and Japan has the dominant role to possible evidence in this field to the international colleagues in this area

Biography

Toshiko Sawaguchi, M.D., Ph.D., L.B.A Research Managing Director, National Institute of Public Health, Ministry of Health Labour & Welfare, Saitama, Japan since April 2017 (Life Health Promotion, Maternal & Child Health) Visiting Professor, Showa University School of Medicine, Tokyo, Japan Forensic and Pediatric Forensic Pathology and Clinical Forensic Medicine for more than 25 years, child health and pediatrics for 10 years.

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Scientific Tracks & Abstracts

Day 2

Psychosomatic Medicine & Forensic Congress 2017

Sessions:

Day 2 October 13, 2017

Psychiatry and Behavioural Science | Psychosomatic Disorders | Psychopharmacology | Somatoform Diseases | Forensic Medicine | Forensic Mental Health | Anthropology | Victimology

Session Chair

George Tolomiczenko

University of Southern California, USA

Session Co-chair

Samuel Ho

City University of Hong Kong, Hong Kong

Session Introduction

Title: A complicated presentation of acute psychosis in a young adult

Priyanka Patil, SUNY Upstate Medical University, USA

Title: Risk and protective for child abuse and neglect among a representative sample of high school students in a district in Istanbul, Turkey

Sinem Yildiz Inanici, Marmara University, Turkey

Title: Metabolic syndrome: A psychiatric perspective

Tariq Munshi, Queen's University, Canada

Title: Immersive virtual reality: A P4 framework for psychosomatic disorders

George Tolomiczenko, University of Southern California, USA

Title: Detection strategies for feigned psychopathology: Test development and effects of criminal charge simulation design on response styles

Natthawut Arin, Chiang Mai University, Thailand

Title: Emotionally unstable personality disorder and psychosomatic problems

Matthew Rinaldi, King's College London, UK

Title: Are mast cells the key to multiple sclerosis (MS)?

Per-Goran Kruger, University of Bergen, Norway

Title: The relationship between memory bias and anxiety

Samuel Ho, City University of Hong Kong, Hong Kong

Title: Impact of parenting style on physiological empowerment and academic achievement

Nasheed Imtiaz, Aligarh Muslim University, India

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A complicated presentation of acute psychosis in a young adult**Priyanka Patil, Andy Beltran, Seetha Ramanathan, Luba Leontieva and James L Megna**
SUNY Upstate Medical University, USA

This is a case report of an 18-year-old male who presented with first episode psychosis (FEP) with symptoms of catatonia, negativity & religious delusions and was admitted in our unit for 2 months. This was a case in which we had difficulty in diagnosis, difficulty in treating & for those of us who were closely involved in his care, had difficulty dealing with a myriad of emotions, including helplessness and anger. Differential diagnoses of NMS, malignant catatonia & NMDA encephalitis was considered. We were limited in the use of antipsychotics as the patient developed EPS & increased CPK, along with unstable vital signs on 4 different antipsychotics. He neither responded to high doses of up to 22 mg Lorazepam; nor did he respond to i/V Solumedrol. There was a pattern of high expressed emotion amongst the family; so much so that their visits would become a major trigger for the patient's aggressive outbursts. There were also some cultural barriers that contributed to communication gaps during family meetings. Religious themes had to be considered with highly religious family members and religious delusions in both patient and his sister. During his inpatient stay there were repeated episodes of assaultive behavior towards multiple staff members leading to a high tension atmosphere in the unit and a non-nurturing milieu. In this case report we would like to discuss the diagnostic uncertainty in FEP; the control of aggressive behavior when one is limited in the use of antipsychotics & influence of psychosocial factors on patient's stay in the unit. We also want to concentrate on what we could have done differently or better. Although the patient is now improved on Clozapine, considering the family dynamics, we would also like to discuss how we can work on preventing a relapse.

Biography

Priyanka Patil is a third year Psychiatry Resident at SUNY Upstate Medical University, Syracuse New York, USA.

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Risk and protective factors for child abuse and neglect among a representative sample of high school students in a district in Istanbul, Turkey

Sinem Yildiz Inanici, M Akif Inanici, Anil Cifter, Sinem Kucukozer, Berk Buke, Sirac Gundogdu, Beyza Dogan and Feyza Ustuner
Marmara University, Turkey

Statement of the Problem: So many risk and protective factors are related to child abuse victimization. Understanding these multi-level determinants is important to tailor appropriate prevention strategies.

Methodology & Theoretical Orientation: 661 high school students with the mean age of 15.69 (SD=0.96) participated in the study voluntarily. Participants were chosen by cluster sampling method. Researchers prepared a questionnaire to detect risk and protective factors for childhood abuse with the help of relevant literature. Rathus Assertiveness Inventory was used to evaluate assertiveness. Marmara University Ethical Committee approved the study. SPSS 14.0 was used to execute analysis.

Findings: 53.4% (n=353) of the participants were females. More than half of the participants' perceived SES was medium and less. 234 students (35.5%) did not have personal room at home. Approximately one fourth of the participants said that their families did not have enough social support. 73% (n=484) were going to school by public transport or on foot and nobody accomplished to 39.5% (n=261) of them. Level of feeling secure in their neighborhood was moderate and less for 40.8% (n=269) of the students and 367 participants (55.9%) indicated that they did not have secure sport/game arena in their environment. 333 (49.9%) had difficulties to obey school rules and 214 students (32.4%) were truants. Most of the students (80.2%, n=529) used unhealthy substances a few times. Approximately one third of the students had violent close friends. They predicted that three or more children in their close environment were the victim of emotional violence (43%, n=284) and physical violence (20.4%, n=135).

Conclusion & Significance: Vulnerable adolescents and families must be supported psycho-socio-economically. Security measures may be discussed in adolescent groups at schools. School rules may be discussed, revised, and rationalized in small discussion groups in schools. University students may be involved in prevention programs in high schools.

Biography

Sinem Yildiz Inanici is presently working as a Assistant Professor at Marmara University in Turkey.

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Metabolic syndrome: A psychiatric perspective**Tariq Allauddin Munshi**
Queen's University, Canada

Statement: Metabolic syndrome is a term that describes a group of conditions that puts an individual at risk for cardiovascular disease. This term represents increased waist circumference which is regarded as a central feature, lipid dysregulation, raised fasting blood glucose and presence of hypertension. It has been known over the years as insulin resistance syndrome, syndrome X, the deadly Quartet since the 1920's. The criteria used mostly is International Diabetes Federation and the United States National Cholesterol Educational Program Adult Treatment Panel (NCEPATP) III criteria for metabolic syndrome.

Orientation: People with severe mental illness such as schizophrenia and bipolar disorder are at increased risk of developing cardiovascular disease, as a result of multiple aetiology including genetic, life style, disease specific as well as effect of treatment. They live 25 years less than general population and complications arising from cardiovascular disease are among the leading cause of death for people with chronic schizophrenia.

Significance: The high risk patients need to be identified at the outset so an individualised care plan can be formulated. Education regarding life style changes, prescribing suitable psychotropic medication, establishing a temporal relationship and identifying the variables to make a management plan is vital.

Learning Objectives: At the end of this session participants will be able to: 1. Be aware of the prevalence of metabolic syndrome in psychiatric population. 2. Highlight the importance of identifying the risk factors for developing metabolic syndrome in psychiatric inpatient setting at an early stage.

Biography

Tariq Allauddin Munshi is currently working as an attending Psychiatrist in the Department of Psychiatry at Queen's University & has been given the rank of an Associate Professor. His current responsibilities are working with the Assertive Community Team; managing beds in the acute adult inpatient unit at Kingston General Hospital. His responsibilities in the department are administrative, research, teaching and providing clinical service. The areas of interest are newer antipsychotics, clozapine, metabolic syndrome, quality improvement and mental health act.

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Immersive virtual reality: A P4 framework for psychosomatic disorders**George Tolomiczenko**

University of Southern California, USA

Statement of the Problem: Evidence supporting the effectiveness of immersive virtual reality (VR) in understanding and treating a growing number of psychiatric conditions has been documented in recent reviews. Much of studies conducted focus on exposure and/or training designed to decrease reactive symptoms and/or to learn and to practice adaptive behaviors. The utility of a P4 framework – personalized, predictive, preventive and participatory medicine is clear and open for further exploration. Extending the application of a P4 framework by linking each of these dimensions of modernizing medicine to guide the design of immersive VR experience in applications related to psychosomatic disorders is the focus of this presentation.

Methods & Theoretical Orientation: VR scenarios can be personalized to suit, study and challenge a given patient. This has been the chief dimension exploited thus far in crafting therapies unilaterally; that is, based on the presenting symptoms, VR exercises are prescribed by the clinician and undertaken by the patient. VR scenarios can create an immersive experience presenting situations and features that can shed light on predictive psychological factors and, as some studies have done, teach patients how to master adaptive behaviors aiming to prevent symptom onset and exacerbation. Real-time adjustment of VR immersive experience based on live patient feedback using emotion detection (via facial and verbal expression, wearable sensors) will greatly improve these capabilities. By integrating modern technologies enabling patient-centered design of tailored immersive VR interventions, therapists can truly empower participatory involvement in both prevention and treatment.

Conclusion & Significance: The P4 framework with illustrative technologies that bring it to a new level of bilateral implementation is presented. This toolkit will extend the range and improve the impact of immersive VR therapies relevant for improving empathy toward and treating psychosomatic illnesses.

**Biography**

George Tolomiczenko has experience as a Clinician, Researcher, Teacher and Administrator, which helps him in his Administrative Director role to guide and run the Health, Technology and Engineering program at USC (HTE@USC). After an interdisciplinary undergraduate degree at Caltech, he earned a Doctorate in Clinical Psychology at Boston University. As both a Scientist and Clinician working at medical institutions affiliated with Harvard University, his focus shifted to public health and policy issues involving homelessness and mental illness. In Toronto, his efforts were devoted to creating and funding programs and partnerships enabling disease-focused basic research, knowledge translation and adapting chronic disease models. He is now focused on developing USC's interdisciplinary collaborative strengths applied to medical device and process innovation. He teaches courses designed to form and train teams linking engineering and medicine to create innovative and licensed technology and start-up companies.

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Detection strategies for feigned psychopathology: Test development and effects of criminal charge simulation design on response styles**Natthawut Arin**

Chiang Mai University, Thailand

The structure and objectivity to detecting feigned psychopathology being extremely require of forensic setting in Thailand. The Thai version of malingering test (Th-MT) was developed as the first test to reduce the obstacle to language and suitable to Thai context. This initial test was developed based on two broad detection strategies; unlikely and amplified detection strategy (Rogers, 2008). Moreover, the effective sub-detection strategies of the most popular malingering tests including; SIRS, SIMS and M-FAST (Rogers, Bagby, & Dickens, 1992; Smith & Burger, 1997; Miller, 2001) were combined. The 518 samples were collected from non-clinical (undergraduate students, n=421) and clinical samples (psychiatric patients, n=97). The result revealed: 1) In study one, the two detection strategies model supported by confirmatory factor analysis was used to analyze; unlikely detection strategy (two sub-detection strategies; Rare Symptoms and Symptom Combinations were loaded), while the three sub-detection strategies of amplified detection strategy were not totally supported (Extreme Psychopathology, Over Negative Self-Image and Suggestibility & Over-report). The combination of Over Negative Self-Image and Suggestibility & Over-report to new strategy called *Over-report* was reached to goodness-of-fit indices. Furthermore, this Th-MT possesses good internal consistency. 2) Using a simulation designed in study two, one group of simulators asked to feign psychopathology to avoid criminal prosecution of homicide charge (Simulator students, n= 45) were compared with two control groups asked to reply to questions honestly (Honest students, n= 45 and Honest psychiatric patients, n= 45). The results indicate that the mean scores of the Th-MT for simulator students were significantly higher than those of both honest students and honest psychiatric patients. Conclusions, the Th-MT has good psychometric properties of a detecting feigned psychopathology tool and to reliable screen for malingered psychopathology.

Biography

Natthawut Arin completed his BS (Psychology: Clinical track), MA (Criminology & Criminal Justice) and PhD (Applied Behavioral Science Research) from University in Thailand. I used to be a clinical psychologist and work as forensic psychologist at Galya Rajanagarindra Institute (Government hospital for forensic psychiatric services), Mental Health Department, Ministry of Public Health for 15 years ago. I have more inspiration to conduct and continue doing the research in forensic psychology issue (e.g. risk assessment, criminal responsibility, malingering). Now, I am a lecture at Psychology Department of Chiang Mai University. And also teach in forensic psychology and criminal psychology subjects.

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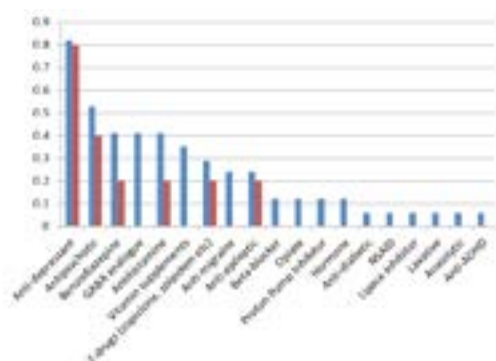
Emotionally unstable personality disorder and psychosomatic problems**Matthew Rinaldi**King's College London, London, UK
Bethlem Royal Hospital, UK

Statement of the Problem: There are a specific sub-group of patients with emotionally unstable personality disorder (EUPD) who tend to somatize overwhelming feelings rather than act them out via risky behaviors. They present to primary care services, receive polypharmacy and are more likely to commit suicide. There are neuropsychiatric, psychodynamic and developmental explanations for their tendency to somatize, but very little epidemiological data. We performed an audit of a tier-3 personality disorder unit to determine the prevalence of psychosomatic disorders in this population and to determine any relationship between these diagnoses, prescribing practices and attendance at therapy.

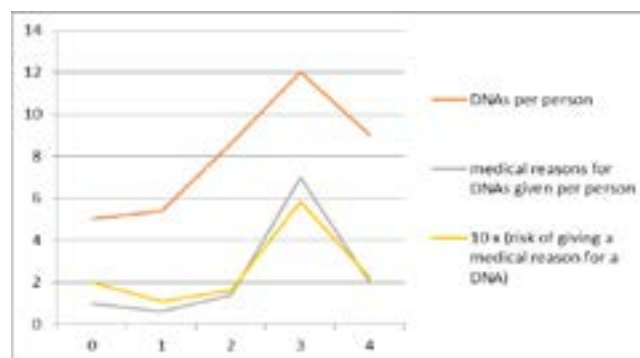
Methodology & Theoretical Orientation: We conducted an audit of 63 waiting-list patients and performed a key-term search to determine frequency of psychosomatic symptoms. We also performed a sub-group analysis of those patients in mentalization-based therapy (i.e., with confirmed EUPD) and recorded the medications they were prescribed and their attendance at therapy.

Findings: Psychosomatic conditions affected 57% of the waiting list population and 77% of the sub-group analysis. The most common complaints were unexplained musculo-skeletal pain, unexplained chest pain and irritable bowel syndrome. Those with co-morbid psychosomatic conditions were prescribed more medications, missed more therapy and cited medical reasons more often for missed appointments.

Conclusion & Significance: Psychosomatic disorders are more common in patients with EUPD than those without the diagnosis. Psychosomatic disorders impact on attendance at therapy and increase the risk of polypharmacy. As such, psychosomatic conditions should be routinely screened for at assessment and be positively diagnosed so that they can be addressed as a barrier to engaging in treatment and understood within therapy as a coping mechanism. Psychosomatic disorders should be among the list of differentials as the multi-disciplinary team investigate, interpret and manage physical symptoms sensibly.



Graph 1: Medications prescribed per-person in the sub-group analysis of those with (blue) and without (red) psychosomatic disorders



Graph 2: Relationship between the number of psychosomatic disorders (x-axis); DNA rates and the risk of giving a medical reason for a DNA (y-axis)

Biography

Matthew Rinaldi is a core Trainee Psychiatrist on the Maudsley training programme. He has interests in psychosomatic conditions, the psychotherapeutic understanding and multi-disciplinary management of them. A trainee who works for bottom-up service improvement, his work stems from under-researched problems that he encounters in clinical practice.

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Are mast cells the key to multiple sclerosis (MS)?

Per Goran Kruger

University of Bergen, Norway

MS may not be an autoimmune genetic disease. Since the ninety-fifties the opposite statement has strangled most scientific approaches to the understanding of MS. Mast cells are aggregated along venules in border zones of the MS-plaques, and if stimulated releases specific mediators as histamine, resulting in oedema formations normally observed in the early onset of MS, as well as proteases that may cause demyelination. The numbers of mast cells in the plaque-border zones of females is approximately doubled from that in males, which may explain the fact that females are more inclined to developing MS than males. Mast cells may be stimulated by various stress phenomenon, which in itself forward the possibility that MS is a sociocultural phenomenon. This is also strengthened by the observation that fragments of secreted chromogranins from the entero-endocrine system stimulate mast cells to secretion. The fact that stimulated mast cells survive, and within weeks/months may fully reload, may explain the frequent relapsing-remitting alternating phases of MS.

Biography

Per Goran Kruger, professor emeritus . Studied biology in Bergen, Norway on mast cells in the brain of wake and hibernating hedgehogs. Studied the mechanism of histamine secretion from mast cells at Karolinska institute Stockholm, Sweden and at Inst. of pathology in Seattle, USA. In the seventies he opposed to the planned fluoridation of Norwegian drinking waters (Which never started after that). Last 30 years engaged in multiple sclerosis and points to the obvious connection to mast cells. Received students prize for not using power point when teaching cell biology and histology.

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The relationship between memory bias and anxiety

Samuel Ho

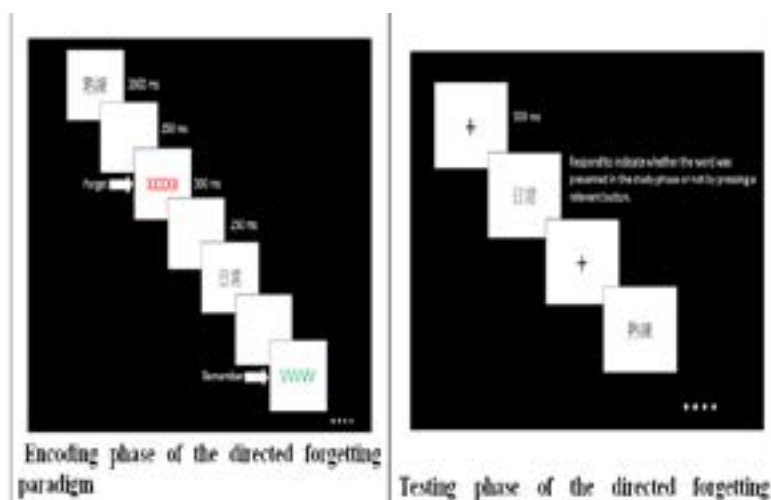
City University of Hong Kong, Hong Kong

Statement of the Problem: Cognitive models postulate that schema-congruent biases towards danger and vulnerability in the processing of emotional information play a vital role in the onset and maintenance of anxiety symptoms. Two recent experimental studies among breast cancer survivors and community adolescents confirmed the above proposition by showing that participants with higher negative attentional bias tended to report more anxiety symptoms. Compared to attentional bias, the role of memory bias on anxiety symptoms is relatively less investigated, especially among children and adolescents. This presentation will report the results of a study to examine the relationship between memory bias and anxiety symptoms.

Methodology & Theoretical Orientation: The theory of intentional forgetting, that is the voluntary forgetting of material after it has been encoded, has been used to guide the study. Intentional forgetting was measured by the item-method directed forgetting paradigm (Figure 1). A total of 142 high school students between 12.25 to 17.70 years old (mean age=14.23 years; SD=1.25 years) participated in this study.

Findings: More anxious participants tended to exhibit more difficulty in forgetting negative stimuli. An anxiety x depression interaction effect on positive attentional bias was obtained. Individuals with higher anxiety levels would exhibit less positive memory bias only when they were also having high depression level. Anxiety had no relationship with positive memory bias among those non-depressed individuals.

Conclusion & Significance: Negative cognitive processing biases, including both attentional and memory biases play a more significant role in anxiety than positive cognitive processing biases.



Biography

Samuel M Y is the Associate Provost (Institutional Initiatives) and a Professor of Psychology at the City University of Hong Kong. As a Registered Clinical Psychologist, his research interest is in Psychopathology, especially etiology of anxiety and depression. Currently, he is conducting a series of experiments to examine the relative roles of positive and negative cognitive processing styles in anxiety and depression. He is one of the representative figures of Positive Psychology in Asia. He is the Executive Council Member of the Clinical Division of the International Positive Psychology Association.

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Impact of parenting style on psychological empowerment and academic achievement**Nasheed Imtiaz**

Aligarh Muslim University, India

In this modern competitive age, one must be careful about children's psychological empowerment and academic achievement which is most likely to be determined by parenting style. It is imperative to dwell upon the fact that each parent must be cautious with regard to rearing practices that may make them capable for accepting challenges of life with full confidence, competency and efficacy, so that they could handle and master all situations easily. Hence, it is a pressing demand of time that we must deliberate on and search for best parenting style which could be most appropriate for developing psychological empowerment and getting success in their academic endeavors because these two aspects viz., psychological empowerment and academic achievement are the hall mark for the success in life. Hence, present investigation was undertaken to explore the impact of parenting style on psychological empowerment and academic achievement. In this investigation, N=300 high school students were chosen from Delhi and NCR. After administering the test on the participants and analyzing the data the results have been discussed in detail in full length paper in the light of Indian socio-cultural milieu.

Biography

Nasheed Imtiaz completed her Masters degree in Psychology from the Aligarh Muslim University 1996 and Ph.D. in 2000 in Organizational Behavior from the same Department. She did Diploma in Business Management from Institute of Chartered Financial Analysts of India University, Tripura. Qualified Net in June 1997, June 1998 & Dec 1998. She taught at Senior Secondary School (Girls) for Two Academic Sessions and there after she joined the department of Psychology as Lecturer in 2002. At present she is teaching in the capacity of Assistant Professor in the department of Psychology. She has a no. of research publications in reputed journals. She has also been invited by different institutions to deliver invited lectures. She also has attended no. of National /International seminar/conferences where she presented research papers. At present She is devoted to her specialized area of Organizational Behavior, HRD, HRM in addition to her fields of interest viz., cognitive psychology, Psychopathology & research Methods.

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